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PTO/SB/05 (11-00) Approved for use through 10/31/2002. OMB 0651-0032

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UTILITY **PATENT APPLICATION TRANSMITTAL**

Attorney Docket No. TNX00-04 US First Inventor MICHAEL FUNG

ANTI-C2/C2a INIBITORS OF COMPLEMENT **ACTIVATION** Express Mail Label No. TB 191898608115

(Only for new nonprovisional applications under 37 CFR 1.53(b))

| APPLICA | TION ELEMENTS | | | | sioner for Patents |
|--|--|---------------------|--|---|----------------------------------|
| | perning utility patent application cont | _{ents} A | | x Patent Applica ashington, DC 2 | |
| Fee Transmittal Fe | orm (e.g., PTO/SB/17) | 7. | | | |
| 2. X Applicant claims s See 37 CFR 1.27. 3. X Specification (preferred arrangement - Descriptive title - Cross Reference - Statement Regardance - Statement Rega | [Total Pages 24] | : | Computer Program Nucleotide and/or Amino a (if applicable, all necessal a. Computer Reada b. Specification Sequence i. CD-ROM | (<i>Appendix</i>) Acid Sequence (Cy) ble Form (CRF) | Submission |
| | rogram listing appendix | | i i paper c. Statements verify | ing identity of a | hove conies |
| - Brief Summary | of the Invention | Г | ACCOMPANYING | | |
| - Detailed Descrip - Claim(s) - Abstract of the | | _ 1 | 9. Assignment Paper 10. 37 CFR 3.73(b) S (when there is an 11. English Translation | s (cover sheet & tatement assignee) | & document(s)) Power of Attorney |
| 5. Oath or Declaration | [Total Pages | | 2. Information Disclo | | Copies of IDS Citations |
| a. Newly execu | ited (original or copy) | J' | Statement (IDS)/F | | - Orealons |
| Copy from a | prior application (37 CFR 1.63 (d)) ion/divisional with Box 18 completed | ₂₎ 1 | 4. X Return Receipt P | | 503) |
| | ION OF INVENTOR(S) | 1 | 5. Certified Copy of (if foreign priority | | ent(s) |
| named in the | tement attached deleting inventor(s) he prior application, see 37 CFR and 1.33(b). | 1 | Request and Cert (b)(2)(B)(i). Applic or its equivalent. | ification under 3 | 35 U.S.C. 122 |
| 6 Application Data | Sheet. See 37 CFR 1.76 | 1 | 7. Other: | ************ | |
| 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.:/ Prior application information: Examiner Group Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire discrete for the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has beneficially effective omitted from the submitted application parts. | | | | | |
| | 19. CORRESP | WHENCE | ADDRESS | | |
| X Customer Number or Bar Co | de Label (Insen Cusion 111) | | politicis) or | Correspondence a | nddress below |
| Name | CHERYL A. LILJESTR | AND | | | |
| | TANOX, INC. | | ····· | | |
| Address | 10301 STELLA LINK | | | | |
| City | HOUSTON | State | TX | Zip Code | 77025 |
| Country | USA | Telephon | e 713/578-4000 | Fax | 713/578-500 |
| Name (Print/Type) | CHERYL LILJESTRAND | , F | Registration No. (Attorne | v/Agent) 45 | 7 |
| Signature | Chery offices | | 7 | 4 . | ML23,2001 |

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

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| Complete if Known | | | | |
|----------------------|----------------|--|--|--|
| Application Number | TO BE ASSIGNED | | | |
| Filing Date | MARCH 23, 2001 | | | |
| First Named Inventor | Michael FUNG | | | |
| Examiner Name | TO BE ASSIGNED | | | |
| Group Art Unit | | | | |
| Attornov Docket No. | | | | |

| METHOD OF PAYMENT FEE CALCULATION (continued) | | |
|---|--|----------|
| The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: | 3. ADDITIONAL FEES | |
| Deposit | Large Small | |
| Account 20-0087 | Entity Entity Fee Fee Fee Fee Description | Fee Paid |
| Deposit | Code (\$) Code (\$) | |
| Account Name TANOX. INC. | 105 130 205 65 Surcharge - late filing fee or oath | |
| Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 | 127 50 227 25 Surcharge - late provisional filing fee or cover sheet | |
| Applicant claims small entity status. | 139 130 139 130 Non-English specification | |
| See 37 CFR 1.27 2. X Payment Enclosed: | 147 2,520 147 2,520 For filing a request for ex parte reexamination | |
| X Check Credit card Money Other | 112 920* 112 920* Requesting publication of SIR prior to Examiner action | |
| FEE CALCULATION | 113 1,840* 113 1,840* Requesting publication of SIR after Examiner action | |
| 1. BASIC FILING FEE | 115 110 215 55 Extension for reply within first month | |
| Large Entity Small Entity | 116 390 216 195 Extension for reply within second month | |
| Fee Fee Fee Fee Description | 117 890 217 445 Extension for reply within third month | |
| 101 710 201 255 UNIDER FOR | 118 1,390 218 695 Extension for reply within fourth month | |
| 106 320 206 160 Design filing fee | 128 1,890 228 945 Extension for reply within fifth month | |
| 107 490 207 245 Plant filing fee | 119 310 219 155 Notice of Appeal | |
| 108 710 208 355 Reissue filing fee | 120 310 220 155 Filing a brief in support of an appeal | |
| 114 150 214 75 Provisional filing fee | 121 270 221 135 Request for oral hearing | |
| SUBTOTAL (1) (\$) 355,00 | 138 1,510 138 1,510 Petition to institute a public use proceeding | |
| | 140 110 240 55 Petition to revive - unavoidable | |
| 2. EXTRA CLAIM FEES | 141 1,240 241 620 Petition to revive - unintentional | |
| Extra Claims below Fee Paid Total Claims 27 -20** = 7 × 9 = 63 | 142 1,240 242 620 Utility issue fee (or reissue) | |
| Total Claims | 143 440 243 220 Design issue fee 144 600 244 300 Plant issue fee | |
| Claims Multiple Dependent 135 135 | 122 130 122 130 Petitions to the Commissioner | |
| | 123 50 123 50 Processing fee under 37 CFR 1.17(g) | |
| Large Entity Small Entity | 126 180 126 180 Submission of Information Disclosure Stmt | |
| Fee Fee Fee Fee Description Code (\$) Code (\$) | | |
| 103 18 203 9 Claims in excess of 20 | 581 40 581 40 Recording each patent assignment per property (times number of properties) | |
| 102 80 202 40 Independent claims in excess of 3 | 146 710 246 355 Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 104 270 204 135 Multiple dependent claim, if not paid 109 80 209 40 ** Reissue independent claims over original patent | 149 710 249 355 For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 110 18 210 9 ** Reissue claims in excess of 20 | 179 710 279 355 Request for Continued Examination (RCE) | |
| and over original patent | 169 900 169 900 Request for expedited examination of a design application | |
| SUBTOTAL (2) (\$) 3 8 Other fee (specify) | | |
| **or number previously paid, if greater; For Reissues, see above | *Reduced by Basic Filing Fee Paid SUBTOTAL (3) | |

SUBMITTED BY Complete (if applicable) Registration No. (Attornel/iAgent) Name (Print/Type) Cheryl Liljestrand Telephone 45,275 713-578-4182 March 23, 200 Signature

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